

## IMPLEMENTATION OF THE PLAN

**N**IAAA has established nine core strategies for achieving our objectives that will keep the Institute's research enterprise continually directed at advancing the frontier of knowledge across the next five years.

- **Priority Setting.** Continue to seek a productive balance among basic research and research on prevention and treatment initiatives that respond to pressing public health needs, move expeditiously on scientific opportunities as they emerge, and enhance our knowledge base of what works, how, and for whom. Establish and continue to adjust research priorities to ensure scientific progress, meet national needs, and efficiently use the limited resources available to address all goals.
- **Grants Administration and Peer Review.** Maintain effective and efficient grant administration and a high quality of peer review to ensure that only the most meritorious research projects are funded.
- **Management and Supervision.** Ensure that the management and administrative functions necessary to support our mission are carried out effectively and efficiently.
- **Interagency Collaboration.** Continue to work with other Federal agencies to coordinate research opportunities, to partner and reduce duplication of effort, and to share resources, resulting in enhanced effectiveness of programs.
- **Communication of Results.** Communicate scientific results and health information to the alcohol research community, health care providers, patients, policymakers, and the general public.
- **Technology Transfer.** Promote the efficient transfer of new technology forthcoming from NIAAA research to the private sector to facilitate development of new diagnostic tools, drugs and other treatment modalities, and related products with significant public health benefits.
- **Training.** Enhance training programs at the predoctoral, postdoctoral, and early career development levels, especially for underrepresented minorities and women, to ensure an adequate supply of capable individuals in alcohol research.
- **Technical Assistance.** Promote use of the Institute's 15 Alcohol Research Centers as comprehensive technical assistance centers for investigators engaged in multidisciplinary research and as regional education laboratories to assist communities by promoting research on clinical applications.
- **Community Outreach and Education.** Engage schools, postsecondary institutions, colleges, and communities in the development of alcohol awareness and prevention programs, including participation in the National Alcohol Screening Day; creating networks that include educators, employers, and other key stakeholder groups by expanding our public liaison activities; and sponsoring efforts to align prevention policies with new screening methods for assessing problem drinking. Development of an alcohol education module for high school students will be completed and made available for dissemination.



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## KEY EXTERNAL FACTORS THAT COULD AFFECT ACHIEVEMENT OF THE NIAAA'S GOALS AND OBJECTIVES

NIAAA's Strategic Plan for FY 2001–2005 is predicated upon close partnership with our stakeholders (e.g., scientists, clinicians, and the general public) to advance knowledge of cause, prevention, treatment, and consequence of alcohol abuse and dependence and achieve our mission of improved public health. Some factors, however, that could significantly affect the success of this joint partnership are largely outside of its scope. One of these external factors is:

- **American society's tolerance for alcohol misuse.** Widespread social tolerance for inappropriate alcohol use is a countervailing influence to prevention activities by schools and educators who receive Federal assistance for drug-education and prevention activities.

*NIAAA response: Work with others in the Administration to develop and disseminate the best information available on effective intervention strategies and research findings on the effects of misuse. An example of this would be to make known the finding that early use of alcohol by adolescents leads to a high likelihood of dependence in adulthood. NIAAA will work with Federal leadership to increase the visibility of efforts to discourage tolerance for excessive alcohol use.*

## LINKING MISSION AND PERFORMANCE MONITORING

NIAAA is committed to being held accountable for measuring and reporting results on our goals and objectives. Preparing a strategic plan that covers a five-year period is an important step. Progress towards achieving the goals and objectives of the plan will be reviewed annually by the NIAAA Director and program staff, the NIAAA Advisory Council, and other expert *ad hoc* advisers. If the prevailing plan's goals and objectives need to be adjusted because of a shift in scientific priorities, the plan will be re-evaluated. NIAAA will also maintain a dialogue with other interested Federal agencies and offices and lay interest groups regarding the strategic plan. In addition, NIAAA will prepare periodic status reports of its activities. These reports will be constructed from the budget justifications and performance "indicators" or measures of success for all NIAAA programs. These reports will include a mix of outcome and intermediate indicators for science advances, both laboratory and patient-oriented, that NIAAA will use during the next five years to judge progress and document results.

Outcome indicators will tell NIAAA whether progress is being made in areas of national need and in the specific goals for its programs. For example, are more children and teens delaying the onset of drinking or engaging in treatment-seeking behavior? Are more medications available that have proved successful in helping problem drinkers achieve and maintain sobriety?

Intermediate indicators will tell NIAAA whether its strategies are working and its programs and management processes are on track, i.e., is the Institute meeting major milestones and deadlines necessary to achieving its goals and objectives?

*These basic principles are in keeping with the definitions and guidelines outlined in OMB Circular A-11, Part 2.*

## USE OF EVALUATIONS AND ASSESSMENTS

In formulating our goals for FY 2001–2005, NIAAA has incorporated findings from major research studies, national assessments, and rigorous internal and external evaluations of our research programs. NIAAA has an active evaluation program that is multi-tiered and culminates with decisions by its Director. Most current evaluations relate closely to the goals and objectives of this plan. Future ones, including secondary analyses of existing data sets and impact assessments of longitudinal studies to help identify “what works,” as well as to provide comparative information on program effectiveness, will align even more closely and will fill in knowledge gaps where possible. In addition, data from expert reviews of the quality of NIAAA-funded research and program activities by specially convened Subcommittees of the Institute’s National Advisory Council are key sources for strategic directions and indicator data.

For a listing of key documents that provide critical baseline or related data that prospectively inform implementation of NIAAA’s goals and objectives, as delineated in the Plan, and support valid and reliable performance measures, see Appendix A.

NIAAA has also drawn upon findings and recommendations of recent external audits of NIH corporate information systems for the daily management of mission-critical NIAAA functions, including tracking systems for administration of research grant, contract, and intramural projects, budget and accounting information, and technology transfer activities. As part of NIAAA’s technical transfer activities, the Institute is also working to expand and enhance its public Web presence at <http://www.niaaa.nih.gov>. Lastly, NIAAA has relied upon a body of publications by the U.S. General Accounting Office (GAO) that assess best practices and management techniques for Federal agencies to support and align all elements of its research enterprise to improve the Nation’s health.